STATE OF NEW HAMPSHIRE
2017 Statement of Income and Expenses
for LOBBYISTS
(RSA Chapter 15)

PLEASE PRINT

RECEIVED

APR 1 4 2017

NEW HAMPSHIRE
DEPARTMENT OF STATE

I. Name of Lobbyist(s) James Demers, Robert Blaisdell, Tom Prasol

II. Name of lobbyist's partnership, firm or corporation, if any:

Demers, Blaisdell & Prasol, Inc

(Name of partnership, firm or corporation)

72 North Main St. Suite 301   Concord   NH   03301

Business Address: (Street)   (Town/City)   (State)   (Zip Code)

(603 228.1498   (   )   e-mail james.demers@demers-blaisdell.com

(Telephone)   (Fax)

III. This statement covers: (Choose one – file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client).

☐ All reportable transactions occurring in the months prior to the reporting date relative to the following client:

_____
(Full Name of Client as it appears on the Lobbyist Registration Form)

OR

☐ All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client.

IV. Date of Report   April 26, 2017 ☒   July 26, 2017

Reports cover: *activity from date of registration to 3/31/17*   *activity from 4/1/17 to 6/30/17*

October 25, 2017 ☐   January 31, 2018 ☐

activity from 7/1/17 to 9/30/17   *activity from 10/1/17 to 12/31/17*

V. There have been no fees received and no reportable transactions made since the last report. ☐

If this box is checked, complete just this form and submit it to the Secretary of State's Office, State House, Room 204, Concord, NH 03301.

VI. Check if additional reports are attached:

☒ If you have received fees or made expenditures, you must file **Addendum A**– Fees and Expenses

☐ If you have paid an honorarium or reimbursed expenses, you must file **Addendum B**– Report of Honorariums or Expense Reimbursement

☒ If you, your firm, or your family has made political contributions, you must file **Addendum C**– Political Contributions

Sworn Statement/Affirmation by Lobbyist

I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.

_____   4/13/17
(Signature of lobbyist)   (Date)

James M. Demers
(Print Name of lobbyist)

STATE OF NEW HAMPSHIRE
Lobbyists Report of
Political Contributions
Addendum C
(RSA Chapter 15:6)

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NEW HAMPSHIRE
DEPARTMENT OF STATE

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I. Name of Lobbyist(s) _Thomas Prasol_

II. Name of lobbyist's partnership, firm or corporation, if any:

Demers, Blaisdell, and Prasol
(Name of partnership, firm or corporation)

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III. Name of Client _____ Date _____

Political Contributions

For each political contribution that is reportable pursuant to RSA Chapter 664 paid on behalf of the client/lobbyist and lobbying firm, indicate the following:

Full name of candidate: _Boutin_ _David_
           (Last Name)   (First Name)   (Middle Name/Initial)

Amount of contribution $ _100.00/100_   Office Candidate is Seeking _State Senate_

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."

_____

_____

Full name of candidate: _____
           (Last Name)   (First Name)   (Middle Name/Initial)

Amount of contribution $ _____ Office Candidate is Seeking _____

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."

_____

_____

Full name of candidate: _____
           (Last Name)   (First Name)   (Middle Name/Initial)

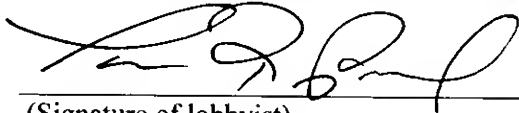Amount of contribution $ _____ Office Candidate is Seeking _____

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."

_____

_____

(If more than three contributions were made, report additional contributions on separate addendum C forms.)

Sworn Statement/Affirmation by Lobbyist

I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.

_____
(Signature of lobbyist)

THOMAS R. PRASOL
_____
(Print Name of lobbyist)

4/13/17
_____
(Date)